STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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APR 2 4 2019

PLEASE PRINT

I. Name of Lobbyist(s) Timothy O. Wilkerson	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's partnership, firm or corporation, if any:	
New England Caple & Telecommunications Association (Name of partnership, firm or corporation)	C. Inc.
10 Forbes Road, #440W, Brantree MA Business Address: (Street) (Town/City) (State)	02184 (Zip Code)
(781) <u>843-3418</u> (781) <u>849-6267</u> e-mail <u>twilkerso</u>	on@necta.info
III. This statement covers: (Choose one – file separate reports for each client, OR you may file reportable expense transactions which are not attributable to any one client).	a separate report for
All reportable transactions occurring in the months prior to the reporting date relative to the following	owing client:
NewEngland Cable & Telecommunications Assoc, = (Full Name of Client as it appears on the Lobbyist Registration Form) OR	inc.
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm unrelated to any particular client.	listed below which are
IV. Date of Report April 24, 2019 Reports cover: activity from date of registration to 3/31/19 April 24, 2019 July 31, 2019 activity from 4/1/19 to 6/30/19	
October 30, 2019	
V. There have been no fees received and no reportable transactions made since the last fithis box is checked, complete just this form and submit it to the Secretary of State's Office, State E. Concord, NH 03301.	
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must file Addendum A- Fees and Expense If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report o	
Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C-	Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the forego and complete to the best of my knowledge and belief. (Signature of lobbyist) (Date)	ing information is true
TIMOTHY D. Wilkerson (Print Name of lobbyist)	

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Timothy O. Wilkerson	
II. Name of lobbyist's partnership, firm or corporation, if any:	
New England Couble & Telecommunic	ations Assoc, Inc
III. Name of Client <u>Same</u>	Date 4/22/19
1V. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 17,367,00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$
c) Total of all fees received to date (Add lines a and b)	c)s 17,367.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ O
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period , not reported in a), of \$25 or less.	b) \$ O
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$_^ ^^
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$
f) Total of all expenses year to date	ns -O-
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
<u>na</u>	s <u>-0-</u>
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
(Signature of lobbyist)	412219 (Date)
TIMOTHY O. WILKERSON (Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

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Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

NEW HAMPSHIRE DEPARTMENT OF STATE

Sworn Statement/Affirmation by Lobbyist	
Name of Lobbying partnership, firm, or corporation: Telecommunications ASSOC.	
Name of Lobbying partnership, firm, or corporation: Telecommunications ASSOC.	IN
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to	o any
particular client):	
f	
Date of Report (check one):	
April 24, 2019	
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above the following Addendums submitted with that Statement (insert the number of Addendum forms to submitted):	, and being
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true complete to the best of my knowledge and belief.	and
(Signature of lobbyist) (Date)	
Timothy O. Wilkerson	
(Print Name of lobbyist)	